



# Florida Department of Environmental Protection

Bob Martinez Center  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Charlie Crist  
Governor

Jeff Kottkamp  
Lt. Governor

Michael W. Sole  
Secretary

September 19, 2007

Mr. Frank J. Colitz  
Crystal River Quarriers, Incorporated  
Post Office Box 216  
Crystal River, Florida 33423-0216

Dear Mr. Colitz:

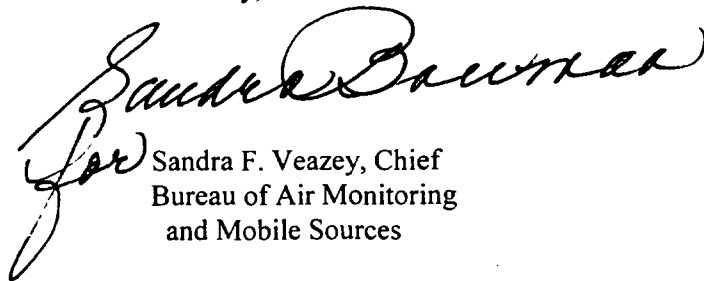
This is to acknowledge that your notification of intent to use the authority of Rule 62-210.310 to operate your facility was received on April 25, 2007. We have assigned ARMS # 7775313-003 to this facility.

As you know, pursuant to Florida Statutes section 403.814, authority to operate under general permits commences thirty days after receipt of the registration form unless you have been notified by this office that your facility has not shown entitlement to operate pursuant to the rule provisions.

For your information, authority to operate pursuant to Rule 62-210.310 expires after 5 years. Therefore, a new registration form must be received no later than 5 years after the date your notice was received as indicated above. If your general permit rule conditions require testing, such testing must be completed within the time frame specified in the rule.

If you have any additional questions, please contact Dickson Dibble at 850/921-9586.

Sincerely,



Sandra F. Veazey, Chief  
Bureau of Air Monitoring  
and Mobile Sources

SFV/pg

cc: Mr. Christopher Bradley, Southwest District

**NONMETALLIC MINERAL PROCESSING PLANTS (CRUSHERS)  
AIR GENERAL PERMIT REGISTRATION FORM**

**Part II. Notification to Permitting Office**

(Detach and submit to appropriate permitting office; keep copy onsite)

**Instructions:** To give notice to the Department of an eligible facility's intent to use this air general permit, the owner or operator of the facility must detach and complete this part of the Air General Permit Registration Form and submit it to the appropriate Department of Environmental Protection or local air pollution control program office which has permitting authority. Please type or print clearly all information, and enclose the appropriate air general permit registration processing fee pursuant to Rule 62-4.050(4)(o), F.A.C. (\$100 as of the effective date of this form)

7775313-003

**Registration Type**

Check one:

**INITIAL REGISTRATION** - Notification of intent to:

- Construct and operate a proposed new facility.
- Operate an existing facility not currently using an air general permit (e.g., a facility proposing to go from an air operation permit to an air general permit).

**RE-REGISTRATION** (for facilities currently using an air general permit) - Notification of intent to:

- Continue operating the facility after expiration of the current term of air general permit use.
- Continue operating the facility after a change of ownership.
- Make an equipment change requiring re-registration pursuant to Rule 62-210.310(2)(e), F.A.C., or any other change not considered an administrative correction under Rule 62-210.310(2)(d), F.A.C.

**Surrender of Existing Air Operation Permit(s) - For Initial Registrations Only**

If the facility currently holds one or more air operation permits, such permit(s) must be surrendered by the owner or operator upon the effective date of this air general permit. In such case, check the first box, and indicate the operation permits being surrendered. If no air operation permits are held by the facility, check the second box.

- All existing air operation permits for this facility are hereby surrendered upon the effective date of this air general permit; specifically permit number(s): \_\_\_\_\_
- No air operation permits currently exist for this facility.

**General Facility Information**

**Facility Owner/Company Name** (Name of corporation, agency, or individual owner who or which owns, leases, operates, controls, or supervises the facility.)  
CRYSTAL RIVER QUARRIES, INC.

**Site Name** (Name, if any, of the facility site; e.g., Plant A, Metropolis Plant, etc. If more than one facility is owned, a registration form must be completed for each.)  
MAYLEN AVENUE CRUSHER

**Facility Location** (Provide the physical location of the facility, not necessarily the mailing address.)  
Street Address: 287 N. Maylen Ave.  
City: LECANTO                                      County: CITRUS                                      Zip Code: 34461

**Facility Start-Up Date** (Estimated start-up date of proposed new facility.)(N/A for existing facility)  
5/15/07

**Owner/Authorized Representative**

Name and Position Title (Person who, by signing this form below, certifies that the facility is eligible to use this air general permit.)

Print Name and Title: FRANK J. COLITZ, PRESIDENT

Owner/Authorized Representative Mailing Address

Organization/Firm: CRYSTAL RIVER QUARRIES, INC.

Street Address: P. O. BOX 216

City: CRYSTAL RIVER

County: CITRUS

Zip Code: 33423-0216

Owner/Authorized Representative Telephone Numbers

Telephone: 352-795-2828

Fax: 352-795-2409

Cell phone (optional):

**Facility Contact (If different from Owner/Authorized Representative)**

Name and Position Title (Plant manager or person to be contacted regarding day-to-day operations at the facility.)

Print Name and Title: SAME

Facility Contact Mailing Address

Organization/Firm:

Street Address:

City:

County:

Zip Code:

Facility Contact Telephone Numbers

Telephone:

Fax:

Cell phone (optional):

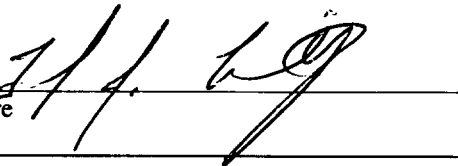
**Owner/Authorized Representative Statement**

This statement must be signed and dated by the person named above as owner or authorized representative

*I, the undersigned, am the owner or authorized representative of the owner or operator of the facility addressed in this Air General Permit Registration Form. I hereby certify, based on information and belief formed after reasonable inquiry, that the facility addressed in this registration form is eligible for use of this air general permit and that the statements made in this registration form are true, accurate and complete. Further, I agree to operate and maintain the facility described in this registration form so as to comply with all applicable standards for control of air pollutant emissions found in the statutes of the State of Florida and rules of the Department of Environmental Protection and revisions thereof.*

*I will promptly notify the Department of any changes to the information contained in this registration form.*

Signature



Date

8/13/07

**Type of Facility**

Check one:

Stationary Facility                       Relocatable Facility

**Type(s) of Precautions Used to Prevent Unconfined Emissions**

Check all that apply for the management of roads, parking areas, stock piles and yards:

Maintain Roads/Parking/Yards       Use Water Application       Use Dust Suppressant  
 Remove Particulate Matter       Reduce Stock Pile Height       Install Wind Breaks

Check the location of spray bars at the nonmetallic mineral processing plant:

Feeders                       Entrance to "Crusher"       Exit of "Crusher"  
 Classifier Screens               Conveyor Drop Points

**Description of Reasonable Precautions**

Below, or as an attachment to this form, provide details of all types of reasonable precautions to be used to prevent unconfined emissions at the facility.

**Application of water, chemicals or other dust suppressants as necessary to unpaved roads, yards, open stockpiles and similar activities.**

**Removal of particulate matter from paved roads and other paved areas under the control of the owner or operator of the facility to prevent reentrainment, and from buildings or work areas to prevent particulate from becoming airborne.**

**Description of Facility**

Below, or as an attachment to this form, provide a description of the nonmetallic mineral processing operations at the facility in sufficient detail to demonstrate the facility's eligibility for use of this air general permit and to provide a basis for tracking any future equipment or process changes at the facility. Describe all air pollutant-emitting processes and equipment at the facility, and identify any air pollution control measures or equipment used.

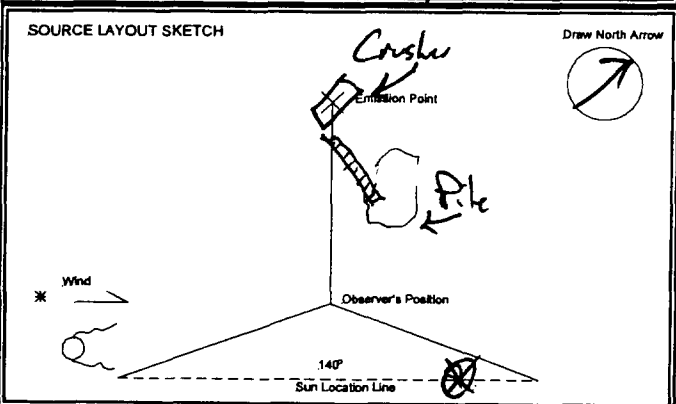
An additional radial stacker/conveyor is being added to the existing Pegson Model 1412 Trackpactor impact crusher. The stacker is an MGL Model 7436. It is 74 ft long unit with a 36 inch wide belt. The unit is powered by a self contained diesel power unit.

# Southern Environmental Sciences, Inc.

1204 North Wheeler Street □ Plant City, Florida 33563 □ (813) 752-5014, Fax (813) 752-2475

## VISIBLE EMISSIONS EVALUATION

COMPANY <i>Crystal River Quarries, Inc.</i>	
UNIT <i>Crusher</i>	
ADDRESS <i>287 W. Myrtle Ave. Leesville, FL 34461</i>	
PERMIT NO. <i>7775313-002-AC</i>	COMPLIANCE? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
AIRS NO. <i>7775313</i>	EU NO. <i>001</i>
PROCESS RATE <i>200 TPH</i>	PERMITTED RATE <i>300 TPH</i>
PROCESS EQUIPMENT <i>Portable Crusher</i>	
CONTROL EQUIPMENT <i>None</i>	
OPERATING MODE <i>Continuous</i>	AMBIENT TEMP. (° F) START <i>85</i> STOP <i>Same</i>
HEIGHT ABOVE GROUND LEVEL START <i>~12'</i> STOP <i>Same</i>	HEIGHT RELATIVE TO OBSERVER START <i>~12'</i> STOP <i>Same</i>
DISTANCE FROM OBSERVER START <i>~105'</i> STOP <i>Same</i>	DIRECTION FROM OBSERVER START <i>330</i> STOP <i>Same</i>
EMISSION COLOR <i>None</i>	PLUME TYPE CONTIN. <input type="checkbox"/> INTERMITTENT <input type="checkbox"/> <i>NA</i>
WATER DROPLETS PRESENT? NO <input checked="" type="checkbox"/> YES <input type="checkbox"/>	IS WATER DROPLET PLUME ATTACHED <input type="checkbox"/> DETACHED <input type="checkbox"/> <i>NA</i>
POINT IN PLUME AT WHICH OPACITY WAS DETERMINED START <i>Bin + Exit</i> STOP <i>Same</i>	
DESCRIBE BACKGROUND START <i>Embankment</i> STOP <i>Same</i>	
BACKGROUND COLOR START <i>Tan</i> STOP <i>Same</i>	SKY CONDITIONS START <i>Clear</i> STOP <i>Same</i>
WIND SPEED (MPH) START <i>0</i> STOP <i>Same</i>	WIND DIRECTION START <i>Calm</i> STOP <i>Same</i>
AVERAGE OPACITY FOR HIGHEST PERIOD <i>0%</i>	RANGE OF OPACITY READINGS MIN. <i>0%</i> MAX. <i>0%</i>



Comments

OBSERVATION DATE <i>8/19/07</i>		START TIME <i>0834</i>		STOP TIME <i>0904</i>					
SEC	0	15	30	45	SEC	0	15	30	45
MIN					MIN				
0	0	0	0	0	30				
1	0	0	0	0	31				
2	0	0	0	0	32				
3	0	0	0	0	33				
4	0	0	0	0	34				
5	0	0	0	0	35				
6	0	0	0	0	36				
7	0	0	0	0	37				
8	0	0	0	0	38				
9	0	0	0	0	39				
10	0	0	0	0	40				
11	0	0	0	0	41				
12	0	0	0	0	42				
13	0	0	0	0	43				
14	0	0	0	0	44				
15	0	0	0	0	45				
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18	0	0	0	0	48				
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20	0	0	0	0	50				
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24	0	0	0	0	54				
25	0	0	0	0	55				
26	0	0	0	0	56				
27	0	0	0	0	57				
28	0	0	0	0	58				
29	0	0	0	0	59				

**EASTERN TECHNICAL ASSOCIATES**

**DALE WINGLER**

met the specifications of Federal Reference Method 202 and qualifies as a visible emissions evaluator. Maximum deviation by volume and black smoke did not exceed 7.5% opacity and no single error exceeding 1.5% opacity was incurred during the certification test conducted by Eastern Technical Associates of Raleigh, NC. This certificate is valid for six months from date of issue and expires on the date below.

2/13/2007      8/15/2007      TMPS06

DATE OF SCHOOL      EXPIRATION DATE      SUBJECT

348032      WINGLER, DALE      *[Signature]*

CERT NUMBER      STUDENT ID NUMBER      BEARER

I certify that all data provided to the person conducting the test was true and correct to the best of my knowledge:

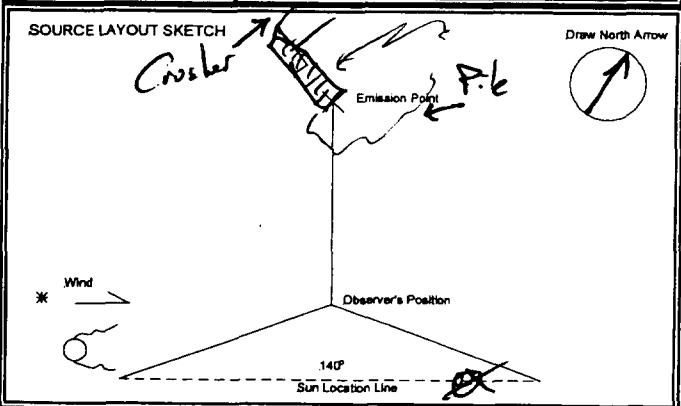
Signature: *Harry Dobbin* Title

# Southern Environmental Sciences, Inc.

1204 North Wheeler Street □ Plant City, Florida 33563 □ (813) 752-5014, Fax (813) 752-2475

## VISIBLE EMISSIONS EVALUATION

COMPANY <i>Crystal River Quarries, Inc.</i>	
UNIT <i>Crusher</i>	
ADDRESS <i>282 N. Maylan Ave. Lecanto, FL 37461</i>	
PERMIT NO. <i>7775313-002-Ac</i>	COMPLIANCE? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
AIRS NO. <i>7775313</i>	EU NO. <i>001</i>
PROCESS RATE <i>200 TPH</i>	PERMITTED RATE <i>300 TPH</i>
PROCESS EQUIPMENT <i>Stacker / Conveyor</i>	
CONTROL EQUIPMENT <i>None</i>	
OPERATING MODE <i>Continuous</i>	AMBIENT TEMP. (° F) START <i>85</i> STOP <i>Same</i>
HEIGHT ABOVE GROUND LEVEL START <i>~30'</i> STOP <i>Same</i>	HEIGHT RELATIVE TO OBSERVER START <i>~30'</i> STOP <i>Same</i>
DISTANCE FROM OBSERVER START <i>~95'</i> STOP <i>Same</i>	DIRECTION FROM OBSERVER START <i>320</i> STOP <i>Same</i>
EMISSION COLOR <i>None</i>	PLUME TYPE CONTIN. <input type="checkbox"/> INTERMITTENT <input type="checkbox"/> <i>NA</i>
WATER DROPLETS PRESENT? NO <input checked="" type="checkbox"/> YES <input type="checkbox"/>	IS WATER DROPLET PLUME ATTACHED <input type="checkbox"/> DETACHED <input type="checkbox"/> <i>NA</i>
POINT IN PLUME AT WHICH OPACITY WAS DETERMINED START <i>Drop Point</i> STOP <i>Same</i>	
DESCRIBE BACKGROUND START <i>Sky</i> STOP <i>Same</i>	
BACKGROUND COLOR START <i>Blue</i> STOP <i>Same</i>	SKY CONDITIONS START <i>Clear</i> STOP <i>Same</i>
WIND SPEED (MPH) START <i>0</i> STOP <i>Same</i>	WIND DIRECTION START <i>Calm</i> STOP <i>Same</i>
AVERAGE OPACITY FOR HIGHEST PERIOD <i>0%</i>	RANGE OF OPACITY READINGS MIN. <i>0%</i> MAX. <i>0%</i>



Comments

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OBSERVATION DATE <i>8/9/07</i>		START TIME <i>0834</i>				STOP TIME <i>0904</i>			
SEC	0	15	30	45	SEC	0	15	30	45
MIN	0	15	30	45	MIN	0	15	30	45
0	0	0	0	0	30				
1	0	0	0	0	31				
2	0	0	0	0	32				
3	0	0	0	0	33				
4	0	0	0	0	34				
5	0	0	0	0	35				
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26	0	0	0	0	56				
27	0	0	0	0	57				
28	0	0	0	0	58				
29	0	0	0	0	59				

**EASTERN TECHNICAL ASSOCIATES**

**DALE WINGLER**

met the specifications of Federal Test Method 202 and qualifies as a visible emissions evaluator. Maximum deviation of 1% black smoke did not exceed 7.5% opacity and no single error exceeding 15% opacity was incurred during the certification test conducted by Eastern Technical Associates of Raleigh, NC. This certificate is valid for six months from date of issue and expires on the date below.

2/13/2007      8/15/2007      TMPS06

DATE OF SCHOOL      EXPIRATION DATE      CLASS/LECTURE

348032      WINGLER, DALE      *[Signature]*

CERT NUMBER      STUDENT ID NUMBER      BEARER

I certify that all data provided to the person conducting the test was true and correct to the best of my knowledge:

Signature: *Harry Robbins* Title

**CRYSTAL RIVER QUARRIES**

**MAYLEN AVE. FACILITY**

**GP Permit Registration**

**August 10, 2007**

**SES Project No: 07P340**

**Prepared By:**

**SOUTHERN ENVIRONMENTAL SCIENCES, INC.  
1204 North Wheeler Street  
Plant City, Florida 33566**



**VISIBLE EMISSIONS EVALUATIONS**

**CRYSTAL RIVER QUARRIES  
MAYLEN AVENUE CRUSHER**

**GP Permit Registration**

**August 10, 2007**

**SES Project No: 07P340  
Facility ID: 7775313**

**Prepared By:**

**SOUTHERN ENVIRONMENTAL SCIENCES, INC.  
1204 North Wheeler Street  
Plant City, Florida 33566**

**PLEASE SEND COPIES  
OF ANY CORRESPONDANCE  
RELATING TO THIS PERMIT TO:**

**Ken Roberts, Vice President  
SOUTHERN ENVIRONMENTAL SCIENCES, INC.  
1204 North Wheeler Street  
Plant City, Florida 33563**

**REGISTRATION FORM**

476293 AUG15 2007

# Crystal River Quarries, Inc.

Producers of High Grade Red Level Dolomite & Hi-Calcium Lime & Rock Products

P.O. BOX 216  
CRYSTAL RIVER, FLORIDA 34423-0216

TELEPHONES:  
OFFICE: (352) 795-2409  
(352) 795-2828  
FAX: (352) 795-6499

August 13, 2007

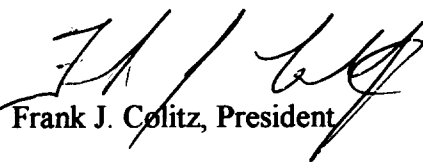
Florida Department of Environmental Protection  
Receipts  
PO Box 3070  
Tallahassee, Fl 32315-3070

Subject: General Permit Registration Maylen Mine for new stacker

Gentlemen:

Enclosed is my Company's General Permit Registration for the new stacker installation at my Company's Maylen Mine and permit fee. If you have any questions, please contact me at the address or phone numbers above.

Sincerely yours,



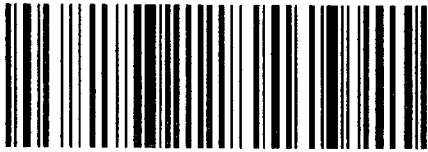
Frank J. Colitz, President

FJC/id

Enclosure

OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL™**

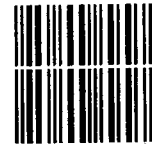


7004 1160 0000 6617 7497



UNITED STATES  
POSTAL SERVICE

0000



32315

U.S. POSTAGE  
PAID  
CRYSTAL RIVER, FL.  
34429  
AUG 14, 07  
AMOUNT

**\$5.94**

00068254-03

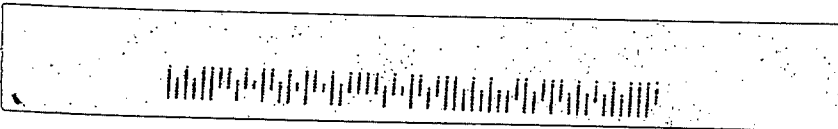
**RETURN RECEIPT  
REQUESTED**

**CRYSTAL RIVER QUARRIES, INC.**

P.O. Box 216  
Crystal River, FL 34423-0216

TO

Florida Dept of Environmental  
Protection  
Receipts  
P.O. Box 3070  
Tallahassee, FL 32315-3070



**Florida Department of Environmental Protection  
Cash Receiving Application (CRA)  
Cashlisting by Deposit #: 281090 thru 281090  
Printed: 8/15/2007 4:41:45 PM - Page 7**

Cashlisting: **63485**    Cashlist Area: **3755**    Description: **DIV OF AIR RESOURCES MGMT.**  
Deposit No: **281090**    Date Deposited: **08/15/2007**    Contact: **PATTY ADAMS**

<u>Object</u>	<u>Transmittal</u>	<u>Dep DDN</u>	<u>Receipt Number</u>	<u>Pre-Numbered Receipt</u>	<u>Name</u>	<u>Check Number</u>	<u>Payment Amount</u>	<u>Reference Account</u>	<u>Payment Number</u>	<u>Remittance Number</u>	<u>Fund</u>
002272	44385	476293	597351		CRYSTAL RIVER QUARRIES, INC	90056	\$100.00		835764	745163	PFTF
Object Code 002272 Subtotal:							\$100.00				
002273	44385	476274	597332		JORGE A LOPEZ	520	\$50.00	251047	835736	745144	APCTF
Object Code 002273 Subtotal:							\$50.00				
002278	44385	476282	597340		CORNERSTONE ABATEMENT & DEMO	8291	\$1,000.00	44601	835747	745152	APCTF
Object Code 002278 Subtotal:							\$1,000.00				
Cashlisting 63485 Total:							\$1,150.00				

Florida Department of Environmental Protection  
Cash Receiving Application (CRA)  
Cashlisting by Deposit Number 281090 thru 281090 Summary  
Printed: 8/15/2007 4:46:10 PM - Page 6

RECEIVED

AUG 17 2007

Bureau of Air Monitoring  
& Mobile Sources

Cashlisting: 63485 Cashlist Area: 3755 Description: DIV OF AIR RESOURCES MGMT.  
Deposit No: 281090 Date Deposited: 08/15/2007 Contact: PATTY ADAMS

Object Code	Description	Total	
002272	NON-TITLE V GENERAL PERMIT	\$100.00	Sandy Bouman 5510
002273	TITLE V GENERAL PERMIT	\$50.00	" " "
002278	ASBESTOS REMOVAL FEE	\$1,000.00	Sheila Schneider 5505
Cashlisting 63485 Total:		\$1,150.00	